

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 7-15-04 2 Serial/Patent # 09/747521

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing			<u>7/9</u>	\$ <u>770</u>
<input type="checkbox"/> Amendment				\$
<input type="checkbox"/> Extension of Time				\$
<input type="checkbox"/> Notice of Appeal/Appeal				\$
<input checked="" type="checkbox"/> Petition			<u>7/9</u>	\$ <u>130</u>
<input type="checkbox"/> Issue				\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$
<input type="checkbox"/> Maintenance				\$
<input type="checkbox"/> Assignment				\$
<input type="checkbox"/> Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>900</u>	
10 REASON:		8 TO BE REFUNDED BY:		
<input type="checkbox"/> Overpayment		<input type="checkbox"/> Treasury Check		
<input checked="" type="checkbox"/> Duplicate Payment		<input checked="" type="checkbox"/> Credit Deposit A/C #: <u>9 03--0172</u>		
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>J F Nichols</u>		TITLE: <u>Bets EVN</u>		
SIGNATURE: <u>J Nichols</u>		PHONE: <u>305-8680</u>		
OFFICE: <u>4770</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****				
APPROVED: <u>Maria Hill</u>		DATE: <u>7/15/04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B